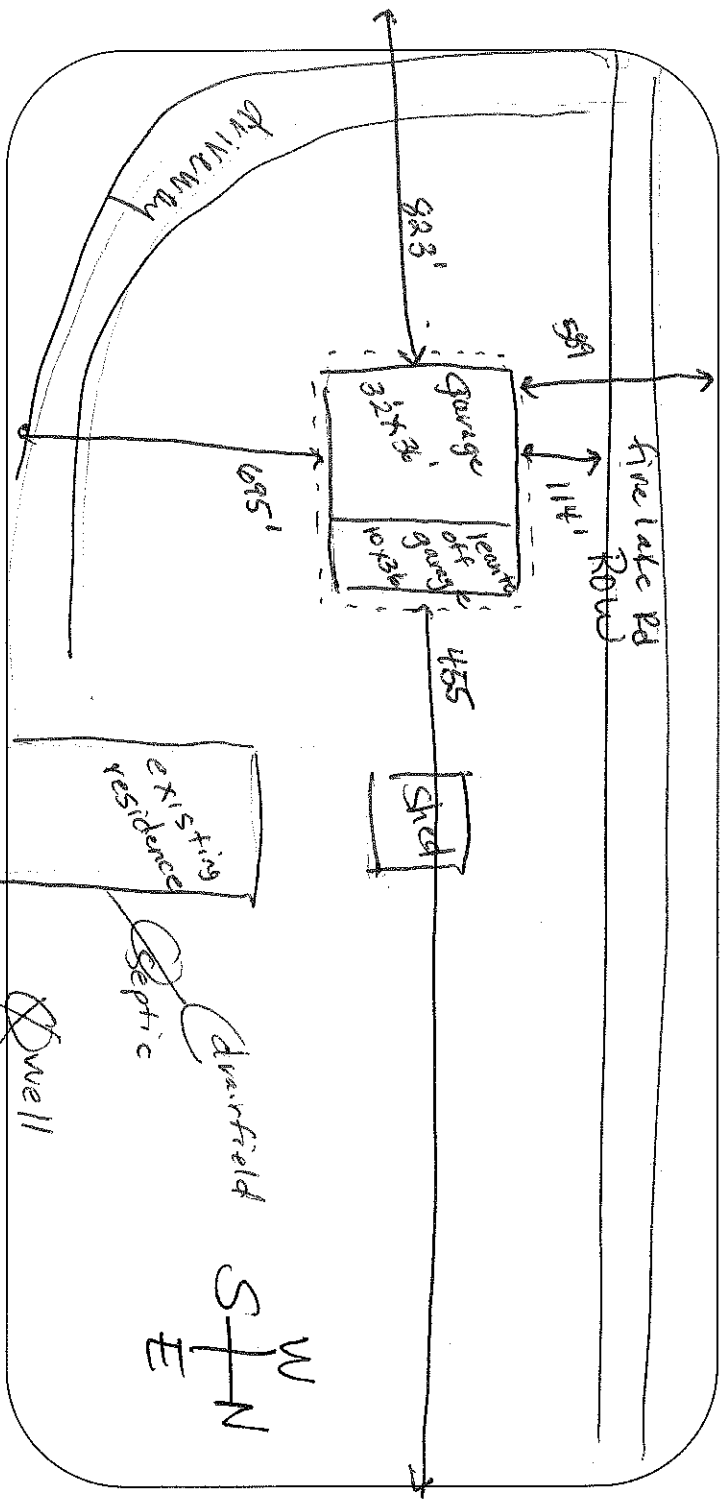


Box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (*): (**) Driveway and (**) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (**) Well (W); (**) Septic Tank (ST); (**) Drain Field (DF); (**) Holding Tank (HT) and/or (**) Privy (P)
- (6) Show any (*): (**) Lake; (**) River; (**) Stream/Creek; or (**) Pond
- (7) Show any (*): (**) Wetlands; or (**) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	114 Feet	Setback from the Lake (ordinary high-water mark)	96.3 Feet
Setback from the Established Right-of-Way	100+ Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	455 Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	823 Feet	Setback from Wetland	200+ Feet
Setback from the West Lot Line	587 Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	695 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	350 Feet	Setback to Well	400 Feet
Setback to Drain Field	350 Feet		
Setback to Privy (Portable, Composting)	N/A Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

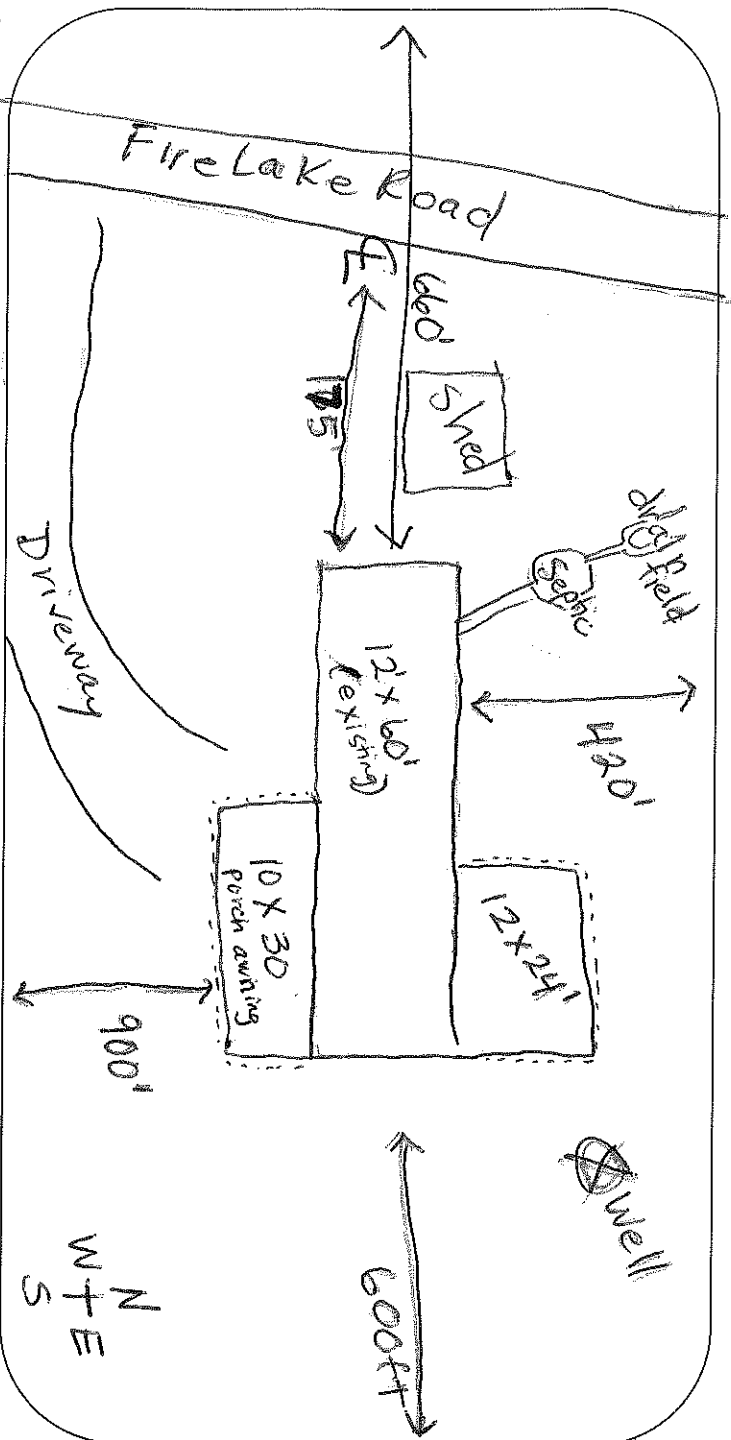
For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:		Sanitary Date:		
Permit Denied (Date):		Reason for Denial:					
Permit #: 14-0105		Permit Date: 6-9-14					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming		<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> No <input checked="" type="checkbox"/> No	Mitigation Required Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No	Affidavit Required Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Case #:		Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Case #:	
Was Parcel Legally Created Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record: well staked. Metal setbacks.		Zoning District (F-1) Lakes Classification (N/A)					
Date of inspection: 6-5-14		Inspected by: M. Furland		Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (if No they need to be attached.) May not be used for human habitation. No water under pressure in structure.							
Signature of Inspector: Michael Stadel		Date of Approval: 6-6-14					
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>	

Below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (*): (*), Driveway and (*), Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (*), Well (W); (*), Septic Tank (ST); (*), Drain Field (DF); (*), Holding Tank (HT) and/or (*), Privy (P)
- (6) Show any (*): (*), Lake; (*), River; (*), Stream/Creek; or (*), Pond
- (7) Show any (*): (*), Wetlands; or (*), Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road		Setback from the Lake (ordinary high-water mark)	1040 Feet
Setback from the Established Right-of-Way	175 Feet	Setback from the River, Stream, Creek	NA Feet
Setback from the North Lot Line	420 Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	900 Feet	Setback from Wetland	300+ Feet
Setback from the West Lot Line	660 Feet	Setback from 20% Slope Area	NA Feet
Setback from the East Lot Line	600 Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	300 Feet	Setback to Well	400 Feet
Setback to Drain Field	350 Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain Field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: 192207	# of bedrooms: 2	Sanitary Date: 6-1-93
Permit Denied (Date):		Reason for Denial:		
Permit #: 14-0110		Permit Date: 6-10-14		
Is Parcel a Sub-Standard Lot: Is Parcel In Common Ownership: Is Structure Non-Conforming:		<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Required Mitigation Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required Affidavit Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Case #:	Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was Parcel Legally Created Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed	
Inspection Record: Well staked. Meet all setbacks.		Zoning District (F-1) Lakes Classification (NA)		
Date of Inspection: 6-5-14		Inspected by: M. Tuttle		Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached)				
Signature of Inspector: Michael Tuttle				
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>
Hold For Fees: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>		

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)
JUN 06 2014
Bayfield Co. Zoning Dept.

ENTERED
Permit #: 14-0119
Date: 6-11-14
Amount Paid: \$75 6-6-14
Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning.asp)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER					
Owner's Name: Dan Zak		Mailing Address: 64900 McCarty Ln Iron River, WI		City/State/Zip: 54847		Telephone: 373-4733		Cell Phone:		Contractor Phone: same		Plumber:		Plumber Phone:					
Address of Property: same		City/State/Zip:		Agent Phone:		Agent Mailing Address (include City/State/Zip):		Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Authorized Agent: (Person Signing Application on behalf of Owner(s)) self		Agent Phone:		Agent Mailing Address (include City/State/Zip):					
PROJECT LOCATION		Legal Description: (Use Tax Statement) 1/4, 1/4		Gov't Lot		Lot(s)		CSM		Vol & Page		Lot(s) No.		Block(s) No. 28153 5219		Subdivision: Ledin		Recorded Document: (i.e. Property Ownership) Volume 1019 Page(s) 270	
Section 33, Township 47 N, Range 8 W		Town of: Iron River		Lot Size		Acreage .62		Distance Structure is from Shoreline: feet		Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Distance Structure is from Shoreline: feet		Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Value at time of Completion * include donated time & material \$ 1100	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water	Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Distance Structure is from Shoreline: feet		Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
							Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes--continue →		Distance Structure is from Shoreline: feet		Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
							<input type="checkbox"/> Non-Shoreland											
							<input type="checkbox"/> New Construction		<input checked="" type="checkbox"/> 1-Story		<input type="checkbox"/> Seasonal		<input type="checkbox"/> 1		<input type="checkbox"/> Municipal/City		<input type="checkbox"/> City	
							<input checked="" type="checkbox"/> Addition/Alteration		<input type="checkbox"/> 1-Story + Loft		<input checked="" type="checkbox"/> Year Round		<input type="checkbox"/> 2		<input type="checkbox"/> (New) Sanitary		<input checked="" type="checkbox"/> Well	
<input type="checkbox"/> Conversion		<input type="checkbox"/> 2-Story		<input type="checkbox"/>		<input type="checkbox"/> 3		<input checked="" type="checkbox"/> Sanitary (Exists)		Specify Type: <u>Gravel</u>								
<input type="checkbox"/> Relocate (existing bldg)		<input type="checkbox"/> Basement		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)										
<input type="checkbox"/> Run a Business on Property		<input type="checkbox"/> No Basement		<input checked="" type="checkbox"/> None		<input type="checkbox"/> Portable (w/service contract)		<input type="checkbox"/> Compost Toilet										
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>										

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length:	Width:	Height:

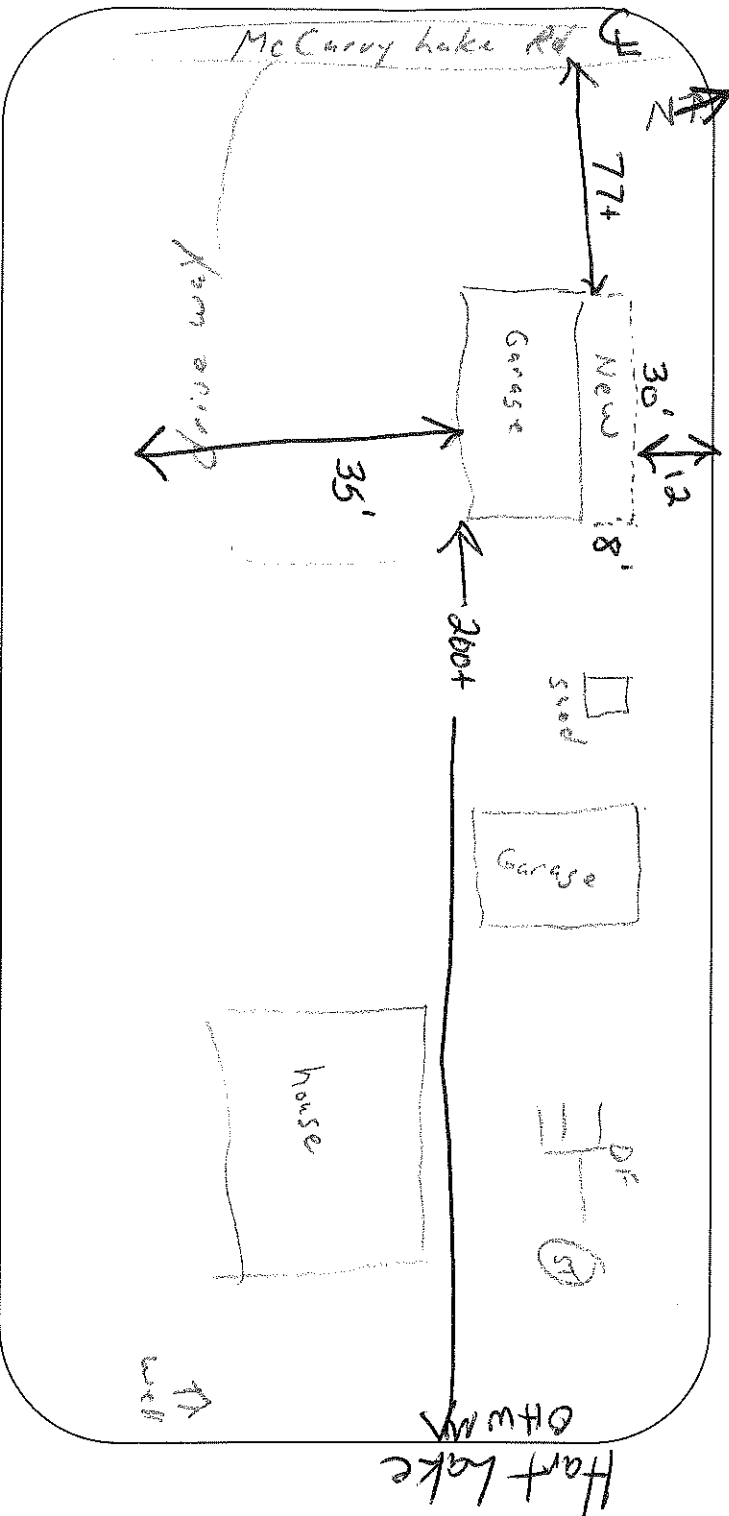
Proposed Use	Proposed Structure	Dimensions	Square Footage	Principal Structure (first structure on property)		()	
				Residence (i.e. cabin, hunting shack, etc.)		()	
				with Loft		()	
				with a Porch		()	
				with (2 nd) Porch		()	
<input checked="" type="checkbox"/> Residential Use	Proposed Structure	Dimensions	Square Footage	with a Deck		()	
				with (2 nd) Deck		()	
				with Attached Garage		()	
				Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)		()	
				Mobile Home (manufactured date)		()	
<input type="checkbox"/> Commercial Use	Proposed Structure	Dimensions	Square Footage	Addition/Alteration (specify)		()	
				Accessory Building (specify)		()	
				Accessory Building Addition/Alteration (specify)		()	
				Rec'd for Issuance		()	
				Special Use: (explain)		()	
<input type="checkbox"/> Municipal Use	Proposed Structure	Dimensions	Square Footage	Conditional Use: (explain)		()	
				Other: (explain)		()	
				Secretarial Staff		()	
				JUN 11 2014		()	
				Special Use: (explain)		()	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):	Date
Authorized Agent:	Date
Address to send permit	

Box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*): (*) Wetlands; or (*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road		Setback from the Lake (ordinary high-water mark)	
Setback from the Established Right-of-Way	77+ Feet	Setback from the River, Stream, Creek	200+ Feet
Setback from the North Lot Line	77+ Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	N/A Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	35 Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	12 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	150+ Feet	Setback to Well	180+ Feet
Setback to Drain Field	150+ Feet		
Setback to Privy (Portable, Composting)	N/A Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 14-0119		Permit Date: 6-11-14		
Is Parcel a Sub-Standard Lot		<input checked="" type="checkbox"/> Yes (Deed of Record)	<input type="checkbox"/> No	
Is Parcel in Common Ownership		<input type="checkbox"/> Yes (Fused/Contiguous Lot(s))	<input checked="" type="checkbox"/> No	
Is Structure Non-Conforming		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Granted by Variance (B.O.A.)		Case #:	Previously Granted by Variance (B.O.A.)	Case #:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record:		Zoning District (R-1)		
Mets all setbacks.		Lakes Classification (1)		
Date of Inspection: 6-9-14		Inspected by: M. Tuttle		Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached.)				
May not be used for human habitation. No water under pressure in structure				
Signature of Inspector: Michael Tuttle		Date of Approval: 6-11-14		
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>
		Hold For Fees: <input type="checkbox"/>		<input type="checkbox"/>

SUBMIT: COMPLETED APPLICATION, TAX
STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

MAY 29 2014

Bayfield Co. Zoning Dept

ENTERED Permit #

14-0122

Date:

6-12-14

Amount Paid:

\$755.53-14

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/fasp)

TYPE OF PERMIT REQUESTED → ☒ LAND USE ☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.A. ☐ OTHER

Owner's Name:

Den Andersen

Mailing Address:

7816 SPIDER LK RD

City/State/Zip:

IRON RIVER, WI, 54847

Telephone:

715-372-4291

Address of Property:

7816 SPIDER LK RD

City/State/Zip:

IRON RIVER, WI, 54847

Cell Phone:

847-224-6545

Contractor:

Construction

Contractor Phone:

715

Plumber Phone:

Authorized Agent: (Person Signing Application on behalf of Owner(s))

Agent Phone:

Agent Mailing Address (include City/State/Zip):

Written Authorization Attached ☐ Yes ☒ No

PROJECT LOCATION Legal Description: (Use Tax Statement)

PLN: (23 digits)

04-024-247-08-19-105-003-03000

Recorded Document: (i.e. Property Ownership) Volume 1056 Page(s) 33

1/4, 1/4

Gov't Lot

3

Lot(s)

CSM

Vol & Page

Lot(s) No.

Block(s) No.

Subdivision:

Lot Size

Acres

.29

Section 19, Township 47 N, Range 8 W

Town of: IRON RIVER

☒ Shoreland → ☐ Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If yes---continue →

Distance Structure is from Shoreline: feet

Is Property in Floodplain Zone? ☐ Yes ☒ No

Are Wetlands Present? ☐ Yes ☒ No

☒ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →

Distance Structure is from Shoreline: feet

754

☐ Non-Shoreland

Value at Time of Completion (What are you applying for)

Project and/or basement

Use

of bedrooms

What Type of Sewer/Sanitary System Is on the property?

Water ☐ City ☒ Well

\$45,000

☒ New Construction ☐ 1-Story ☐ Seasonal ☐ 1 ☐ Municipal/City

☒ Addition/Alteration ☐ 1-Story + Loft ☒ Year Round ☐ 2 ☐ (New) Sanitary Specify Type: ☒ Sanitary (exists) Specify Type: ☒ Sewer

☒ Conversion ☒ 2-Story ☐ Basement ☐ 3 ☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)

☐ Relocate (existing bldg) ☐ No Basement ☒ Portable (w/service contract)

☐ Run a Business on Property ☐ Foundation ☒ Compost Toilet ☐ None

Existing Structure: (If permit being applied for is relevant to it)

Length:

Width:

Height:

Proposed Construction:

Length:

Width:

Height:

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)		(X)	
<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)		(X)	
<input type="checkbox"/> with Loft		(X)	
<input type="checkbox"/> with a Porch		(X)	
<input type="checkbox"/> with (2 nd) Porch		(X)	
<input type="checkbox"/> with a Deck		(X)	
<input type="checkbox"/> with (2 nd) Deck		(X)	
<input type="checkbox"/> with Attached Garage		(X)	
<input type="checkbox"/> Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)		(X)	
<input type="checkbox"/> Mobile Home (manufactured date)		(X)	
<input type="checkbox"/> Addition/Alteration (specify)		(X)	
<input type="checkbox"/> Accessory Building (specify)		(X)	
<input checked="" type="checkbox"/> Accessory Building Addition/Alteration (specify) 2nd story		(12 x 16)	192
<input checked="" type="checkbox"/> Rec'd for Issuance			
<input type="checkbox"/> Special Use: (explain)		(X)	
<input type="checkbox"/> Conditional Use: (explain)		(X)	
<input type="checkbox"/> Other: (explain)		(X)	
Secretarial Staff			

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):

Den Andersen

Date 5/19/14

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date

Address to send permit

7816 SPIDER LK RD, IRON RIVER, WI 54847

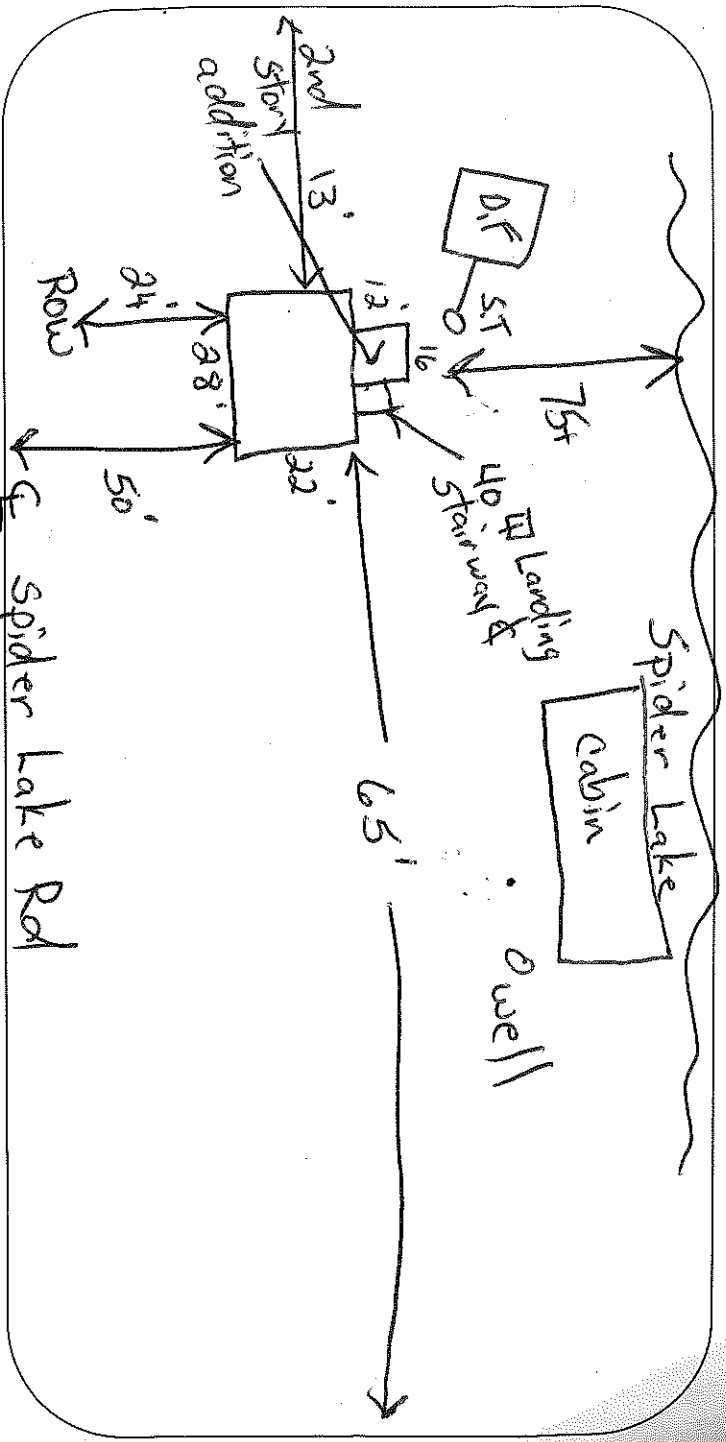
Attach Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

File

- Proposed Construction
North (N) on Plot Plan
(*) Driveway and (*) Frontage Road (Name Frontage Road)
All Existing Structures on Your Property
(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(*) Wetlands; or (*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

(8) **Setbacks:** (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	50 Feet	Setback from the Lake (ordinary high-water mark)	75 Feet
Setback from the Established Right-of-Way	84 Feet	Setback from the River, Stream, Creek	NA Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	NA Feet		
Setback from the South Lot Line	NA Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	13 Feet	Setback from 20% Slope Area	NA Feet
Setback from the East Lot Line	65 Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	121 Feet	Setback to Well	30+ Feet
Setback to Drain Field	30+ Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)						Sanitary Number:		# of bedrooms:	Sanitary Date:																				
Permit Denied (Date):						Reason for Denial:																							
Permit #: 14-0182						Permit Date: 6-18-14																							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming						<input checked="" type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/Contiguous Lots) <input checked="" type="checkbox"/> No		Mitigation Required Mitigation Attached		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																	
Granted by Variance (B.O.A.) Yes <input checked="" type="checkbox"/> No						Case #:		Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Case #:																	
Was Parcel Legally Created Was Proposed Building Site Delineated						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Were Property Lines Represented by Owner Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																			
Inspection Record: Non-conforming structure																													
Date of Inspection: 6-4-14						Inspected by: M. Fuchsle																							
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)																													
May not be used for human habitation. No water under pressure in structure.																													
Signature of Inspector: Michael Fuchsle						Date of Approval: 6-3-14																							
Hold For Sanitary: <input type="checkbox"/>						Hold For TBAs: <input type="checkbox"/>						Hold For Affidavit: <input type="checkbox"/>						Hold For Fees: <input type="checkbox"/>						<input type="checkbox"/>					

Non-Conformists to what? Migration?